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Bib Data Sheet

|  |   |                               |   |                                       |
|--|---|-------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>09/686,539   | <b>FILING DATE</b><br>10/11/2000<br><b>RULE</b> -   | <b>CLASS</b><br>370           | <b>GROUP ART UNIT</b><br><del>2861</del> 2663   | <b>ATTORNEY DOCKET NO.</b><br>FORE-81 |
| <b>APPLICANTS</b><br>Jeff Schulz, Valencia, PA ;<br><b>** CONTINUING DATA *****</b> <i>None</i><br><b>** FOREIGN APPLICATIONS *****</b> <i>None</i>  |   |                               |   |                                       |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 12/12/2000</b> -   |   |                               |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and <i>Chung</i> <i>C.N.</i><br>Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>PA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>15             |
|  |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>2        |
| <b>ADDRESS</b><br>Ansel M Schwartz<br>One Sterling Plaza<br>201 N Craig Street Suite 304<br>Pittsburgh ,PA 15213   |   |                               |   |                                       |
| <b>TITLE</b><br>Parity exchange  |   |                               |   |                                       |
| <b>FILING FEE RECEIVED</b><br>710  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |